

(to be filed by a candidate or his principal campaign committee)

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2. Office Sought (Include title of office as well as parish, city, town and/or election district.)

Marshall Harris  
704 Tom Dr  
D.S., LA  
70726

Livingston  
Parish Council  
Dist 4

10/4

Aug 20

Primary 10/22/2011

This report covers from 12/1/2018 to 12/31/2018 through

#### 4. Type of Report:

2/18/14

To 2/12/18

\_\_\_\_\_180th day prior to primary

           40th day after general

\_\_\_\_ 90th day prior to primary

\_\_\_\_\_ Annual (future election)

\_\_\_\_\_30th day prior to primary

           Supplemental (past election)

\_\_\_\_\_ 10th day prior to primary

✓ Amendment to prior report

5. FINAL REPORT if:

**Withdrawn**

\_\_\_\_ Filed after the election AND all loans and debts paid  
AND no surplus funds remaining

\_\_\_\_\_Unopposed

6. Name and Address of Financial Institution  
(You are required by law to use one or more banks, savings and loan associations, or money market mutual fund as the depository of all campaign funds.)

Amalgam Bank

D.S. LA, 70726

**7. Full Name and Address of Treasurer**

Marshall Harris

9. Name of Person Preparing Report

Daytime Telephone

225-252-3855

10. WE HEREBY CERTIFY that the information contained in this report and the attached schedules is true and correct to the best of our knowledge, information and belief, and that no expenditures have been made nor contributions received that have not been reported herein, and that no information required to be reported by the Louisiana Campaign Finance Disclosure Act has been deliberately omitted.

This 12 day of

February 2015

Signature of Candidate/Chairperson

(To be signed by Chairperson only if report by principal campaign committee)

Daytime Telephone

225-252-3855

Signature of Treasurer

Daytime Telephone

8. FOR PRINCIPAL CAMPAIGN COMMITTEES ONLY

a. Name and address of principal campaign committee, committee's chairperson, and subsidiary committees, if any (use additional sheets if necessary).

1. *Chlorophyll a* (Chl a)  
 2. *Chlorophyll b* (Chl b)  
 3. *Chlorophyll c* (Chl c)  
 4. *Chlorophyll d* (Chl d)  
 5. *Chlorophyll e* (Chl e)  
 6. *Chlorophyll f* (Chl f)  
 7. *Chlorophyll g* (Chl g)  
 8. *Chlorophyll h* (Chl h)  
 9. *Chlorophyll i* (Chl i)  
 10. *Chlorophyll j* (Chl j)  
 11. *Chlorophyll k* (Chl k)  
 12. *Chlorophyll l* (Chl l)  
 13. *Chlorophyll m* (Chl m)  
 14. *Chlorophyll n* (Chl n)  
 15. *Chlorophyll o* (Chl o)  
 16. *Chlorophyll p* (Chl p)  
 17. *Chlorophyll q* (Chl q)  
 18. *Chlorophyll r* (Chl r)  
 19. *Chlorophyll s* (Chl s)  
 20. *Chlorophyll t* (Chl t)  
 21. *Chlorophyll u* (Chl u)  
 22. *Chlorophyll v* (Chl v)  
 23. *Chlorophyll w* (Chl w)  
 24. *Chlorophyll x* (Chl x)  
 25. *Chlorophyll y* (Chl y)  
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 167. *Chlorophyll ak* (Chl ak)  
 168. *Chlorophyll al*

**15001845**

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HAND DELIVERED

# SUMMARY PAGE

RECEIPTS	This Period
1. Contributions (Schedule A-1)	<del>0</del>
2. In-kind Contributions (Schedule A-2)	<del>0</del>
3. Campaign paraphernalia sales of \$25 or less	<del>0</del>
4. <b>TOTAL CONTRIBUTIONS</b> (Lines 1 + 2 + 3)	<del>0</del>
5. Other Receipts (Schedule A-3)	<del>0</del>
6. Loans Received (Schedule B)	<del>0</del>
7. Loan Repayments Received (Schedule D)	<del>0</del>
8. <b>TOTAL RECEIPTS</b> (Lines 4 + 5 + 6 + 7)	<del>0</del>

DISBURSEMENTS	This Period
9. Expenditures (Schedule E-1)	<del>0</del>
10. Other Disbursements (Schedule E-2)	<del>0</del>
11. Loan Repayments Made (Schedule B)	<del>0</del>
12. Funds Loaned (Schedule D)	<del>0</del>
13. <b>TOTAL DISBURSEMENTS</b> (Lines 9 + 10 + 11 + 12)	<del>0</del>

FINANCIAL SUMMARY	Amount
14. Funds on hand at beginning of reporting period (Must equal funds on hand at close from last report or -0- if first report for this election)	71.67
15. <i>Plus</i> total receipts this period (Line 8 above)	<del>0</del>
16. <i>Less</i> total disbursements this period (Line 13 above)	<del>0</del>
17. <i>Less</i> in-kind contributions (Line 2 above)	<del>0</del>
18. Funds on hand at close of reporting period (Lines 14+15-16-17)	71.67